FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1	(See instructions)		0"	ina una amb
NAME OF COMMITTEE (in fi	(Check if name is changed)	Example: If typying, type over the lines	12FE4M5	ice use only
Narragansett B	ay PAC			
ADDRESS (number and st	PO Box 8628			
(Check if addre			LRI L	02920
		CITY	STATE	ZIP CODE 📥
COMMITTEE'S E-MAIL ElizRYoung1@1				
COMMITTEE'S WEB F	PAGE ADDRESS (URL)			
COMMITTEE'S FAX NI 5085482722	UMBER			
3. FEC IDENTIFICATION NUMBER C C00403592				
4. IS THIS STATEME	ENT NEW (N) OR	X AMENDED (A)	_	
I certify that I have examin	ed this Statement and to the best of my kno	owledge and belief it is true, correct ar	nd complete	
Type or Print Name of Treasurer Elizabeth R. Young				
Signature of Treasurer Electronically Filed by Elizabeth R. Young Date Date Date Date				
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. S437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS				
Office Use Only FE3AN042.PDF		For further information of Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 02/2003)